

KANSAS MEDICAID MANAGEMENT INFORMATION SYSTEM  
 PROVIDER PARTICIPATION  
 IN PEDIATRICS

COUNTY CODE NUMBER	MEDICAID DEPT. OF H&E ACTIVE ENROLLED PROVIDERS	LICENSED PROVIDERS	PERCENT OF LICENSED PROVIDERS ENROLLED
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93	3	3	100.00
94	3	2	150.00
95	1	1	100.00
96	13	9	144.44
97	4	4	100.00
98	5	4	125.00
99	1	1	100.00
100	1	1	100.00
101	3	3	100.00
102	1	1	100.00
103	5	6	83.33
104	3	3	100.00
105	117	90	130.00

ALL Total	1100	1098	
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State Plan TN# 91-12 Effective Date 11/1/91  
 Supersedes TN# \_\_\_\_\_ Approval Date 4/24/91



KC  
HCFA-MEDICAID  
REGION VII

91 APR 22 AM 8:26

STATE OF KANSAS

DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

915 S.W. Harrison, Docking State Office Building, Topeka, Kansas 66612-1570

JOAN FINNEY, Governor

April 19, 1991

Mr. Richard Brummel  
Associate Regional Administrator  
for Division of Medicaid  
Room 227, Federal Office Building  
601 East 12th Street  
Kansas City, Missouri 64106

Dear Mr. Brummel:

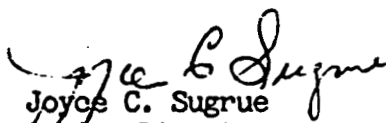
As a result of conversation between our mutual staffs, Kansas is submitting additional information and replacement pages for Kansas Medicaid State Plan amendments MS-90-37 and MS-90-38. Furthermore, Kansas is submitting additional information for amendments MS-91-12 and MS-91-13.

In regard to counties 9 (Chase County) and 35 (Grant County), Kansas' rural nature affects the accompanying statistics. These two counties do not have enrolled providers but all residents residing there travel to receive covered services to towns in neighboring counties which do have enrolled providers. Please refer to the footnoted text regarding access for these two counties.

We are requesting that the obstetrical survey material included in the previous transmittals be deleted.

Questions may be directed to Sally Adams at (913) 296-3981.

Sincerely,

  
Joyce C. Sugrue  
Acting Director  
Division of Medical Services

JCS:SA:brj  
Enclosures

State Plan TN# 90-37 Effective Date 7/1/90  
Supersedes TN#            Approval Date 4/24/91

HCFA-MEDICAID  
REGION VII  
90 NOV -6 AM 10:00



bill

## STATE OF KANSAS

MIKE HAYDEN, Governor

### DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

Docking State Office Building, Topeka, Kansas 66612-1570

(913) 296-3271

October 29, 1990

WINSTON BARTON  
Secretary

THELMA HUNTER GORDON  
Director  
Human Resources

TIM OWENS  
General Counsel

Mr. Richard Brummel  
Associate Regional Administrator  
Health Care Financing Administration  
Room 227, Federal Office Building  
601 East 12th Street  
Kansas City, Missouri 64106

Dear Mr. Brummel:

Administrative  
vices  
S. DUNCAN  
Commissioner

The State of Kansas submits this assurance letter to MS-90-37, Pediatric Practitioner Services. . . Payment Rates. Kansas assures that equality of access is affirmed for Medicaid recipients.

Adult Services  
JAN ALLEN  
Commissioner

Kansas bases this assurance upon a comparison of the number of pediatric physicians enrolled in the Kansas Medicaid Program versus the number of pediatric physicians who are licensed and practicing in Kansas. Of 156 pediatricians who are licensed and practicing in Kansas, 154 (98.7%) are enrolled in the Kansas Medicaid Program.

Alcohol and Drug  
Abuse Services  
ANDREW O'DONOVAN  
Commissioner

As family/general practice physicians also provide pediatric services, Kansas also looked at their numbers. There are 1,021 family/general practice physicians enrolled in the Kansas Medicaid Program. While there are differences in the definitions of speciality between the KMMIS and the data base used to obtain numbers of licensed and practicing physicians, 920 family/general practice physicians are licensed and practice in Kansas. The high correlation between the two numbers assures that Kansas Medicaid recipients have access to pediatric practitioner services.

Income Maintenance/  
Medical Services  
JOHN ALQUEST  
Commissioner

Mental Health/  
Retardation Services  
AL NEMEC  
Commissioner

Rehabilitation  
Services  
GABE FAIMON  
Commissioner

In regard to pediatric immunization codes, Kansas will not be able to supply code and payment specific data because vaccines are purchased through a Kansas Department of Health and Environment contract with the United States Center for Disease Control in Atlanta.

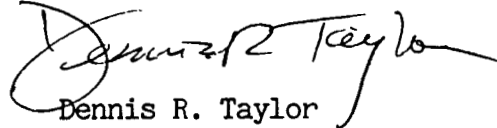
Youth Services  
ROBERT BARNUM  
Commissioner

State Plan TN# 90-37 Effective Date 7/1/90  
Supersedes TN# \_\_\_\_\_ Approval Date 4/24/91

Mr. Richard Brummel  
Page 2  
October 29, 1990

Please do not hesitate to call if we may be of further assistance at  
913-296-3981.

Sincerely,

  
Dennis R. Taylor  
Acting Secretary

Refers to MS-90-37

DRT:JWA:brj

State Plan TN# 90-37 Effective Date 7/1/90  
Supersedes TN# \_\_\_\_\_ Approval Date 4/24/91



MW3

JOAN FINNEY, GOVERNOR OF THE STATE OF KANSAS

KANSAS DEPARTMENT OF SOCIAL  
AND REHABILITATION SERVICES

DONNA WHITEMAN, SECRETARY

April 14, 1993

93 APR 29 AM 8:22  
HHS  
HCFA-MEDICAID  
REGION VII

Mr. Richard P. Brummel  
Associate Regional Administrator  
for Division of Medicaid  
Room 227, Federal Office Building  
601 East 12th Street  
Kansas City, Missouri 64106

Dear Mr. Brummel:

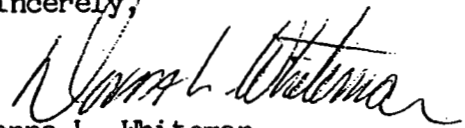
The State of Kansas, in accordance with the State Medicaid Manual 6305.2 and 42 CFR 447.333, submits this assurance regarding Medicaid reimbursement for prescribed drugs.

The State of Kansas assures that the Medicaid payment rate for multiple source drugs does not exceed, in the aggregate, upper limit payment levels established by the Health Care Financing Administration (HCFA) per 42 CFR 447.332(a).

The State of Kansas also assures that the Medicaid payment rate for other drugs (defined as brand name drugs certified as medically necessary by a physician or drugs other than multiple source drugs) does not exceed, in the aggregate, the lower of either the estimated acquisition costs (average wholesale price less 10%) plus reasonable dispensing fees or the provider's usual and customary charges to the general public per 42 CFR 447.332 (b) and (c).

The State of Kansas assures that necessary findings support these assurances.

Sincerely,

  
Donna L. Whiteman  
Secretary

DLW:RLE:TAH:pm

cc: Steve Otto

TN#MS-93-09 Approval Date MAY 03 1993 Effective Date APR 01 1993 Supersedes No Number



file

# STATE OF KANSAS

MIKE HAYDEN, Governor

## DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

Docking State Office Building, Topeka, Kansas 66612-1570

(913) 296-3271

November 14, 1989

WINSTON BARTON  
Secretary

THELMA HUNTER GORDON  
Special Assistant

TIM OWENS  
General Counsel

ANN ROLLINS  
Public Information  
Director

Administrative  
ices  
DUNCAN  
Commissioner

Adult Services  
JAN ALLEN  
Commissioner

Alcohol and Drug  
Abuse Services  
ANDREW O'DONOVAN  
Commissioner

Income Maintenance/  
Medical Services  
JOHN ALQUEST  
Commissioner

Mental Health/  
Retardation Services  
AL NEMEC  
Commissioner

Rehabilitation  
Services  
GARE FAIMON  
Commissioner

Youth Services  
ROBERT BARNUM  
Commissioner

Mr. William R. Blake, Jr.  
Associate Regional Administrator  
for Division of Medicaid  
Room 227, Federal Office Building  
601 East 12th Street  
Kansas City, Missouri 64106

Dear Mr. Blake:

The State of Kansas, in accordance with the State Medicaid Manual 6305.2 and 42 CFR 447.333, submits this assurance regarding Medicaid reimbursement for prescribed drugs. The State submits this assurance in addition to the Methods and Standards for Establishing Payment Rates for Prescribed Drugs as contained within Attachment 4.19-B, #12.a. of the Kansas Medicaid State Plan.

The State of Kansas assures that the Medicaid payment rate for multiple source drugs does not exceed, in the aggregate, upper limit payment levels established by the Health Care Financing Administration (HCFA) per 42 CFR 447.332(a).

The State of Kansas also assures that the Medicaid payment rate for other drugs (defined as brand name drugs certified as medically necessary by a physician or drugs other than multiple source drugs) does not exceed, in the aggregate, the lower of either the estimated acquisition costs (average wholesale price less 10%) plus reasonable dispensing fees or the provider's usual and customary charges to the general public per 42 CFR 447.332 (b) and (c).

The State of Kansas assures that necessary findings support these assurances.

Sincerely,

Winston Barton  
Secretary

WB:JWA:SA:plk

cc: Steve Otto



# STATE OF KANSAS

MIKE HAYDEN, Governor

## DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

Docking State Office Building, Topeka, Kansas 66612-1570

(913) 296-3271

March 14, 1989

WINSTON BARTON  
Secretary

THELMA HUNTER GORDON  
Special Assistant

TIM OWENS  
General Counsel

ANN ROLLINS  
Public Information  
Director

Administrative  
Services  
Director

Adult Services  
JAN ALLEN  
Commissioner

Alcohol and Drug  
Abuse Services  
ANDREW O'DONOVAN  
Commissioner

Income Maintenance/  
Medical Services  
JOHN ALQUEST  
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Mental Health/  
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AL NEMEC  
Commissioner

Rehabilitation  
Services  
GABE FAIMON  
Commissioner

Youth Services  
ROBERT BARNUM  
Commissioner

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Associate Regional Administrator  
for Division of Medicaid  
Room 227, Federal Office Building  
601 East 12th Street  
Kansas City, Missouri 64106

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The State of Kansas assures that necessary findings support these assurances.

Sincerely,

Winston Barton  
Secretary

WB:JWA:SA:mrw



*Assurance*

*4.19B*

STATE OF KANSAS

MIKE HAYDEN, GOVERNOR

STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

WINSTON BARTON, SECRETARY

DOCKING STATE OFFICE BUILDING  
TOPEKA, KANSAS 66612-1570

December 28, 1987

Mr. Edward M. Brennan  
Associate Regional Administrator  
for Program Operations  
Health and Human Services  
Federal Office Building, Room 225  
601 East 12th Street  
Kansas City, Missouri 64106

Dear Mr. Brennan:

The State of Kansas, in accordance with 1902(a)(30)(A) of the Social Security Act and 42 CFR 447.332, submits this assurance regarding Medicaid reimbursement for prescribed drugs. The State submits this assurance in addition to the Methods and Standards for Establishing Payment Rates for Prescribed Drugs as contained within Attachment 4.19-B, #12.a. of the Kansas Medicaid State Plan.

The State of Kansas assures that the Medicaid payment rate for multiple source drugs does not exceed, in the aggregate, upper limit payment levels established by the Health Care Financing Administration (HCFA) per 42 CFR 447.332(a).

The State of Kansas also assures that the Medicaid payment rate for other drugs (defined as brand name drugs certified as medically necessary by a physician or drugs other than multiple source drugs) does not exceed, in the aggregate, the lower of either the estimated acquisition costs plus reasonable dispensing fees or the provider's usual and customary charges to the general public per 42 CFR 447.332 (b) and (c).

The State of Kansas assures that necessary findings support these assurances.

Sincerely,

A handwritten signature in cursive script, appearing to read "Winston Barton".

Winston Barton  
Secretary

WB:SA:bss

TN# MS-87-44A Approval Date 3/7/88 Effective Date 11/1/87 Supersedes TN# Nothing





12/3/80  
Litter

STATE OF KANSAS

STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

ROBERT C. HARDER SECRETARY

STATE OFFICE BUILDING  
TOPEKA KANSAS 66612-15

September 26, 1986

Mr. Dean R. Mordy  
Associate Regional Administrator  
for Program Operations  
Federal Office Building, Room 225  
601 East 12th Street  
Kansas City, Missouri 64106

Dear Mr. Mordy:

This letter conveys a Kansas Medicaid State Plan amendment concerning optional targeted case management services in accordance with Section 1915 (b) after (4) and 1915 (g) of the Social Security Act, and under Sections 1902 (a) (1) and (a) (23) of the Act. The State is waiving Section 1902 (a) (10), comparability of services per Section 1915 (g) (1).

Kansas provides targeted, medical case management services in seven counties (Douglas, Johnson, Leavenworth, Saline, Sedgwick, Shawnee and Wyandotte) for all Medicaid recipients except Medicare/Medicaid (dual) beneficiaries, adult care home residents and foster care recipients.

To qualify as a case manager, a physician must be licensed to practice medicine in Kansas, and be enrolled as a provider in the Kansas Medicaid Program in one of the following provider specialties: family practice, general practice, internal medicine, obstetrics/gynecology, pediatrics or osteopathy.

Reimbursement for the case management services is a capitated amount per month per recipient. Other medical services are reimbursed to the provider using the current reimbursement methodology appropriate to the category of service.

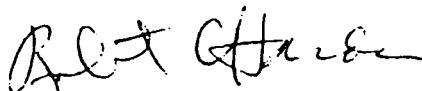
The physician case manager provides primary medical care and accepts the responsibility for the recipient's health care by authorizing, locating, coordinating and monitoring all medical care. Kansas has a 1915 (b) waiver regarding freedom of choice which restricts a recipient's choice of other medical providers and their services.

EPSDT services are provided by the case manager, or referral is made for EPSDT services if the case manager does not perform them. The case manager refers for nonemergency services provided by another doctor, a hospital, pharmacy, laboratory, psychologist, an ambulance, for radiology, medical supplies, durable medical equipment, orthotics and prosthetics, and home health. Referral is not needed for emergency, dental, optometric, podiatric, chiropractic, community mental health center or family planning services.

Kansas assures that medical case management services do not duplicate case management available from another authority. Case management services do not duplicate those included in the home and community based services waiver.

This amendment is an addition to Attachment 3.1-A and Attachment 4.19-B. Its number is 19.

Sincerely,



Robert C. Harder  
Secretary

RCH:bss

cc: Steve Otto  
L. Kathryn Klassen